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Substitute for form 1449/PTO				Complete if Known		
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STATEMENT BY APPLICANT			ANT	First Named Inventor	O'Rourke, Michael	
				Art Unit	3774	
(Use as many sheets as necessary)				Examiner Name	SCHILLINGER, ANN M	
Sheet	1	of	1	Attorney Docket Number	084329-000000US	

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ^{2 (Flavore)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No.1	Foreign Patent Document		Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	т6	
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)	MM-DD-YYYY		or Relevant Figures Appear	Ľ
	1	SU	566567		07-30-1977	KIMED I [SU]; INST CHIMII VYSOKOMOLEKULYA RNY [SU]	English Abstract Only	

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	2	Supplementary Partial European Search Report of European Application No. 03767299, dated February 27, 2009, 3 pages total.	

Examiner Signature	/Ann Schillinger/	Date Considered	06/05/2009

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw fine through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

"Applicant's unique cattorio designation number (optional") Applicant is to place a check mark here if English language Translation is attached.

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